

STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

APR 1 1 2017

PLEASE PRINT

NEW HAMPSHIRE OF STATE

I. Name of Lobby	vist(s) Jeffrey Perry		DEPARTMENT	
II. Name of lobby	vist's partnership, firm	or corporation, if a	àny:	
	(Name of partnership, firm	or corporation)		
300 Renaissance	Center, MC 482-C30-C	76 Detroit	МІ	48265
Business Address:	(Street)	(Town/City)	(State)	(Zip Code)
(313) 667-0946	(;	313) 665-0735	e-mail jeffrey.perry	/@gm.com
(Telephor		(Fax		
reportable expens	se transactions which a	re not attributable	rts for each client, OR you me to any one client). the reporting date relative to the	
General Moto		and months prior to	and reporting dute relative to the	ie following enem.
		t ac it annears on the L.	obbyist Registration Form)	
<u>OR</u>	(r an rame of Chen	t as it appears on the L	oboyist Registration Form)	
All reportable t unrelated to any pa	transactions by the lobby articular client.	vist (including the lol	bbyist's family), or the lobbying	g firm listed below which are
IV. Date of Reports cover:	rt April 26, 2017 activity from date of regist	ration to 3/31/17	July 26, 2017 (1) activity from 4/1/17 to 6/30/17	7
	October 25, 2017 activity from 7/1/17 to		January 31, 2018 [.] activity from 10/1/17 to 12/31	1/17
	ked, complete just this fo		e transactions made since t he Secretary of State's Office, S	
VI. Check if addi	tional reports are attac	·hed:		
	•		file Addendum A – Fees and E	xpenses
	id an honorarium or rei		ou must file Addendum B – Re	-
☐ If you, your fi	rm, or your family has n	nade political contrib	outions, you must file Addendu	ım C- Political Contribution
I have read RSA 1	e best of my knowledge oyist)	and RSA 664 and h	hereby swear or affirm that the $\frac{4/9}{2017}$ (Da	
(Print Name of lo	bbyist)			